Apprehension of outbreak of Anthrax

† 789. SHRJMATIKUM KUM RAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether there is an apprehension of outbreak of Anthrax in the country;

(b) if so, the details thereof; and

(c) the measures taken by Government to combat it?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. C.P. TH AKUR): (a) and (b) Yes, Sir. It is possible in the context of the present world scenario. Natural anthrax is endemic in some parts of the country. The data available with National Institute of Communicable Diseases (NICD) is given below:

State	1999		2000		2001	
	Cases	Deaths	Cas"es	Deaths	Cases	Deaths
Karnataka	8	5	Nil		4	2
West Bengal	Nil		43	3	Nil	

(c) A statement is attached [Refer to the Statement appended to the answer to Unstarred Question No. 781 part (c)]

Overstay of Medical Officers of CGHS dispensaries of ISM&H

790. SHRI SURYABHAN PATIL VAHADANE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Medical Officers of CGHS dispensaries of ISM&H are working at one station for more than two decades;

(b) whether the number of patients relating to ISM&H dispensaries has reduced considerably because of casual/negligent attitude of Medical Officers of these dispensaries; and

(c) if so, the action Government propose to take to improve the functioning of such dispensaries where the Medical Officers have staying for more than two decades and have become negligent towards patients?

THE MINISTER OFSTATE IN THE MINISTRYOF HUMAN RESOURCE DEVELOPMENT [DR. (SHRIMATI) RITA VERMA]: (a) Yes, Sir. Further, there is

† Original notice of the question was received in Hindi.

no policy of the Government at present for transfer of ISM & H Physicians from one city to another after completion of a fixed term.

(b) No such complaint has been received by the Government.

(c) In view of (b) above, the question does not arise.

TB patients in the country

791. SHRIMATI BASANTISARMA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of T.B. patients at present in the country;

(b) the total number of persons who have died of T.B., so far, in the country; and

(c) the details of treatment which is available in the various hospitals in the country, State-wise?

THE MINISTEROF STATE IN THE MINISTRYOF HUMAN RESOURCE DEVELOPMENT [DR. (SHRIMATI) RITA VERMAJ: (a) India accounts for nearly l/3rd of global TB burden. Under the programme, about 1.4 million TB cases are detected and put on treatment every year. It is estimated that almost an equal number of TB cases are detected and treated by Non-Governmental Organizations and private practitioners.

(b) Deaths are not reported under the National TB Control Programme. However, it is estimated mat 5 lac people die of TB every year in the country.

(c) To control the diseases, National TB Control Programme is in operation in the country since 1962. The programme is integrated with primary health care infrastructure. To achieve a cure rate of 85% of new sputum positive cases and to detect at least 70% of such cases. Revised National TB Control Programme is being implemented in the country in a.phased manner. About 440 million population has already been covered under the revised strategy till now. It is envisaged to cover 500 million population by 2002 and 800 million population by 2004 under the revised strategy. Under the TB Programmes, free of cost diagnostic and treatment facilities are provided to the public. For this purpose, 447 District Tuberculosis Centres (DTCs) and 330 Chest Clinics have been established in the country. In addition to this, in the districts where Revised National TB Control Programme (RNTCP) is under implementation for diagnosis of TB, one microscopy centre for every one lac population has been established except in the tribal areas where one microscopy centre has been established for every 50,000 population.